24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	PAGE 1 OF 5 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼	
Planned Farentinood votes	C C00489799	
Check if X 24-hour report 48-hour report New report Amends report fill	led on Man / Dad / Yayayay	
Full Name of Payee Planned Parenthood Votes Northwest	Date of Public Distribution/Dissemination	
Mailing Address 2001 East Madison Street	11 01 2014 Amount	
City State Zip Code	1500.00	
Seattle WA 98122	Transaction ID : B538768 Date of Disbursement or Obligation	
Purpose of Expenditure GOTV canvass Category/ Type 004	11 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mork Pogish	fice Sought: House District:	
Mark Begich Oppose	President Senate State: AK Sbursement For: Primary General	
Calendar Year-To-Date Per Election for Office Sought 458708.74 Dis 20:		
Full Name of Payee Planned Parenthood Votes Northwest	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 2001 East Madison Street	Amount	
City State Zip Code	500.00	
Seattle WA 98122	Transaction ID : B538765 Date of Disbursement or Obligation	
Purpose of Expenditure GOTV phone calls Category/ Type 004	11 / D D / Y 2014	
Mayle Daviele	ffice Sought: House District:	
Оррозе	President Senate State: AK	
	sbursement For: Primary	
(a) SUBTOTAL of Itemized Independent Expenditures	2000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	7 7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eit party committee) any political party committee or its agent.		
Aletheia Henry [Electronically Filed] Date	10 31 2014	
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LIVI EXI END	TIONES		PAGE 2 OF 5 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)			FEC ID	DENTIFICATION NUMBER ▼	
Planned Parenthood Votes			C	C00489799	
Check if 24-hour report 48-hour report New report Amends report filed on					
Full Name of Payee			Date of Public	Distribution/Dissemination	
76 Words			M 10 /	30 / 2014	
Mailing Address 1806 Vernon St, NW #100			Amount		
City	State	Zip Code		15000.38	
Washington	DC	20009	Transaction I Date of Disbu	D: B538769 ursement or Obligation	
Purpose of Expenditure Production of online ad		Category/ Type 004	10	30 / 2014	
Name of Federal Candidate		Support	Office Sought:	House District:	
Cory Gardner		X Oppose		Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought	1	138716.55	Disbursement For: 2014 Other (sp	Primary	
Full Name of Payee			Date of Public	c Distribution/Dissemination	
Denver Westword			10	30 / 2014	
Mailing Address PO Box 5970			Amount		
City	State	Zip Code		2916.00	
Denver	СО	80217	Transaction ID Date of Disbu	D: B538770 ursement or Obligation	
Purpose of Expenditure Print and online advertising		Category/ Type 004	10	30 / 2014	
Name of Federal Candidate		Support	Office Sought:	House District:	
Cory Gardner		Oppose	President >	Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought		1138716.55	Disbursement For: 2014 Other (sp	Primary X General Decify) ▶	
(a) SUBTOTAL of Itemized Independent Expendent	litures			17916.38	
			7	7 ~	
(b) SUBTOTAL of Unitemized Independent Expe	enditures		•	7	
(c) TOTAL Independent Expenditures			•	7 1 2	
Under penalty of perjury I certify that the indeposit, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorized				
Aletheia Henry	[Electron	nically Filed] Date	10 / 31	2014	
Signature					

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	I EXI ENDI	TOTILO		PAGE 3 OF 5 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)			FEC	DENTIFICATION NUMBER ▼	
Planned Parenthood Votes			С	C00489799	
Check if 24-hour report 48-hour report New report Amends report filed on					
Full Name of Payee The Denver Post			M = M	blic Distribution/Dissemination	
Mailing Address PO Box 17930			Amount	02 2014	
City	State	Zip Code		14610.00	
Denver	CO	80217		on ID: B538771 sbursement or Obligation	
Purpose of Expenditure Print advertising		Category/ Type 004	11	02 / 2014	
Name of Federal Candidate		Support	Office Sought:	House District:	
Cory Gardner		X Oppose	President	Senate State: CO	
Calendar Year-To-Date Per Election for Office Sought	11	38716.55	Disbursement For 2014 Other	r:	
Full Name of Payee Community Outreach Group LLC			Date of Pu	ublic Distribution/Dissemination	
Mailing Address 1110 Vermont Ave N.W. #300			11	01 2014	
			Amount		
City	State	Zip Code		4926.55	
Washington Purpose of Expenditure	DC	20005		n ID : B538772 sbursement or Obligation	
GOTV phone calls		Category/ Type 004	11	01 2014	
Name of Federal Candidate		X Support	Office Sought:	House District:	
Kay Hagan		Oppose	President	Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought	7	1910682.37	Disbursement For 2014 Other	r:	
(a) SUBTOTAL of Itemized Independent Expenditure	·S			19536.55	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				71171171	
(b) SUBTOTAL of Unitemized Independent Expendit	ures		•	7 7 7	
(c) TOTAL Independent Expenditures			.	7.1.7.1.7.1	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized				
Aletheia Henry	[Electroni	cally Filed] Date	10 / 3		
Signature					

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	LINDITOTIES	PAGE 4 OF 5 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼	
Planned Parenthood Votes		C C00489799	
Check if 24-hour report 48-hour report	New report Amends report	filed on	
Full Name of Payee Community Outreach Group LLC		Date of Public Distribution/Dissemination	
Mailing Address 1110 Vermont Ave N.W. #300		11 01 2014 Amount	
City State Washington DC	Zip Code 20005	44338.98 Transaction ID : B538773	
Purpose of Expenditure GOTV canvass	Category/ Type 004	Date of Disbursement or Obligation 11 01 2014	
Name of Federal Candidate	Support C	Office Sought: House District:	
Kay Hagan Calendar Year-To-Date	Oppose D 1910682.37 2	President Senate State: NC Disbursement For: Primary General	
Per Election for Office Sought	4 Other (specify) ▶		
Full Name of Payee Planned Parenthood Health Systems Action Mailing Address 100 South Boylan Avenue	n Fund	Date of Public Distribution/Dissemination 11 01 2014 Amount	
City State	Zip Code	349.00	
Raleigh NC Purpose of Expenditure	27603	Transaction ID : B538774 Date of Disbursement or Obligation	
GOTV phone calls	Category/ Type 004	11 / 01 / 2014	
Name of Federal Candidate Kay Hagan	Support Oppose	Office Sought: House District: President X Senate State: NC	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary X General 2014 Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures)	44687.98	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures)		
Under penalty of perjury I certify that the independent expe with, or at the request or suggestion of, any candidate or au party committee) any political party committee or its agent.			
Aletheia Henry Signature	[Electronically Filed] Date	10 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
- gridian o			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

	chedule E)	ATOTILO		PAGE 5 OF 5 FOR SE OF FORM 24/48	
	ME OF COMMITTEE (In Full)		FEC	IDENTIFICATION NUMBER ▼	
Ρ	lanned Parenthood Votes		C	C00489799	
Ch	Check if 24-hour report 48-hour report New report Amends report filed on				
	Full Name of Payee Planned Parenthood Health Systems Action F	und	Date of Pul	blic Distribution/Dissemination	
Mailing Address 100 South Boylan Avenue			Amount	01 2014	
	City State	Zip Code		3141.00	
	Raleigh NC	27603		n ID : B538775 sbursement or Obligation	
	Purpose of Expenditure GOTV canvass	Category/ Type 004	M - M 11	01 2014	
	Name of Federal Candidate	Support	Office Sought:	House District:	
	Kay Hagan	Oppose	President	Senate State: NC	
	Calendar Year-To-Date Per Election for Office Sought	910682.37	Disbursement For: 2014 Other (: Primary X General	
	Full Name of Payee		Date of Pu	blic Distribution/Dissemination	
	Mailing Address		Amount		
	City State	Zip Code		, , , , , , , , ,	
	Purpose of Expenditure	Category/ Type	Date of Dis	sbursement or Obligation	
	Name of Federal Candidate	Support	Office Sought:	House District:	
	Calendar Year-To-Date Per Election for Office Sought		Disbursement For		
	(a) SUBTOTAL of Itemized Independent Expenditures		. •	3141.00	
	(b) SUBTOTAL of Unitemized Independent Expenditures		· •	7-1-7-1-7-1	
	(c) TOTAL Independent Expenditures		•	87281.91	
١	Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.				
	Aletheia Henry [Electron	nically Filed] Date	10 / 31		
	-				